### **VIA FACSIMILE:** 703/872-9306

Atty. Docket No. WHI06 P-302

### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Art Unit

2859

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Examiner

Amy R. Cohen

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Applicants Appln. No. Sharon K. Ernst et al.

SEP 2 8 2004

Filing Date

10/627,139

July 25, 2003

Confirmation No.

3917

For

PLAQUE WITH ALIGNMENT AND ATTACHMENT

SYSTEM FOR SYMBOLS

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

Dear Sir:

### CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following papers are being transmitted by facsimile to the Patent and Trademark Office on the date shown below:

- 1. Claims as Amended (in duplicate, 4 pages)
- 2. Response (26 pages)

YOU SHOULD RECEIVE A TOTAL OF 31 PAGES.

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Grand Rapids, Michigan 49501

(616) 949-9610

P.02

Atty. Docket No. WHI06 P-302

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PRICE HENEVELD

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Alexandria, Virginia 22313-1450

Dear Sir:

Transmitted herewith is a response to the Office Action mailed June 29, 2004 in the above-identified application.

Any fee for additional claims has been calculated as shown below:

### **CLAIMS AS AMENDED**

	Col. 1	Col. 1 Col. 2 Col. 3 Small Entity		Entity	Other Than A Small Entity			
	Claims Remaining After Amendment	·	Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee	Rate	Add'l Fee
Total Claims	*50	Minus	**38	=12	x \$9	\$108	x \$ 18	\$
Independent Claims	*6	Minus	***6	=0	x \$43	\$0	x \$ 86	\$
First Presentation of Multiple Dependent Claims \$145							x \$290	\$
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT								\$

Applicant

Sharon K. Ernst et al.

Appln. No.

10/627,139

Page

2

- \* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3
- \*\* If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- \*\*\* If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

- 1. \_\_x Small entity status of this application 37 CFR §§1.9 and 1.27 has been established by a verified statement previously submitted or is enclosed.
- 2. No additional fee is required.
- 3. x A fee in the amount of \$108.00 is due.
- 4. Please charge any fees or credit overpayment to Deposit Account No. 16 2463.

  A duplicate copy of this sheet is attached.

PRICE, HENEVELD, COOPER, DEWITT & LITTON, LLP

9128104

Date

Marcus P. Dolce

Registration No. 46 073

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Atty. Docket No. WHI06 P-302

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